

F/6-19-22

AFFIDAVIT OF CORRECTION TO BIRTH RECORD

Page 2 of 2

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL

Enter Correct Information Concerning Person Whose Birth Record is Being Amended	REGISTRANT'S FULL NAME AT BIRTH				STATE FILE OR BIRTH NUMBER			
	MILDRED ZULIEN HIGGINS				139-22-004468			
ITEMS TO BE AMENDED OR CORRECTED	BIRTH DATE	Month Feb	Day 16	Year 1922	BIRTH PLACE	CITY OR TOWN Greenwood	COUNTY Greenwood	STATE S. C.
	ITEM OMITTED OR IN ERROR				BIRTH CERTIFICATE SHOWS		SHOULD BE	
	Given name of child				Unnamed Higgins		Mildred Zulien Higgins	
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:						RELATIONSHIP	
	SIGNATURE OF PARENT (OR OTHER) <i>M. N. Higgins</i>						Father	
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON			SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES		
	Apr 19 1978			<i>Deloris B Moore</i>		Mar 11 1985		
AFFIDAVIT	I HEREBY DECLARE UPON OATH THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT:						RELATIONSHIP	
	SIGNATURE OF PARENT (OR OTHER)							
NOTARY (AFFIX SEAL)	SUBSCRIBED AND SWORN TO BEFORE ME ON			SIGNATURE OF NOTARY		NOTARY COMMISSION EXPIRES		
	19					19		
DO NOT WRITE BELOW THIS LINE								
ABSTRACT of Supporting Evidence (for health dept. use)	NAME AND KIND OF DOCUMENT (INCLUDING BY WHOM ISSUED AND DATE OF ISSUE)						DATE ORIGINAL DOCUMENT WAS MADE	
	1	Furman University Registrar's Record, Greenville, S.C.						Sep 15 1938
	2							
	3							
INFORMATION CONCERNING REGISTRANT AS STATED IN DOCUMENT OF CORRESPONDING NUMBER ABOVE								
1	Mildred Zulien Higgins, DOB: Feb 16 1922							
2								
3								
ADDITIONAL INFORMATION								
I certify that I have examined the documents referred to above, that they show no changes or erasures, and appear to be authentic.				ASSISTANT STATE REGISTRAR		EVIDENCE REVIEWED BY		
				<i>Dorism Byars</i>		<i>Deloris B Moore</i>		
						DATE FILED		
						4-25-78		

DHEC No. 613

Rev. 2/75

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